

Garretson

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER <u>Garretson Weekly</u>		2. DATE <u>10/1/07</u>
3. FREQUENCY OF ISSUE <u>Weekly</u>	3A. NO. OF ISSUES PUBLISHED ANNUALLY <u>52</u>	3B. ANNUAL SUBSCRIPTION PRICE \$ <u>24.00</u>
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <u>PO Box 310, Garretson, Minnehaha Co., South Dakota 57030</u>		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <u>PO Box 5034, Sioux Falls, SD, 57117-5034</u>		
6. FULL NAME OF PUBLISHER: <u>Arnold Garson</u>		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">FULL NAME <u>Argus Leader Media.</u></div> <div style="width: 45%;">COMPLETE MAILING ADDRESS <u>PO Box 5034, Sioux Falls SD 57117-5034</u></div> </div>		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form. <u>NONE</u>		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	<u>1022</u>	<u>981</u>
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors and counter sales.	<u>180</u>	<u>153</u>
2. Mail Subscription (Paid and or requested)	<u>669</u>	<u>659</u>
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	<u>849</u>	<u>812</u>
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	<u>0</u>	<u>0</u>
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	<u>75</u>	<u>75</u>
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)		<u>887</u>
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	<u>98</u>	<u>94</u>
2. Return from News Agents	<u>0</u>	<u>0</u>
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	<u>924</u>	<u>981</u>

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
 I swear that the statements made by me are true, correct, and complete:

[Signature]
 (Signature)

[Signature]
 (Title)

State of South Dakota)

County of Minnehaha)

(Seal)

JACQUELINE ZIMMERMAN

NOTARY PUBLIC
 SOUTH DAKOTA

Form: SOS REC 051 7/2004

Sworn to before me this 1st day of October, 2007

[Signature]
 Notary Public

My commission expires: 12-22-09

RECEIVED

S.D. SEC. OF STATE